ATTACHMENT 1:
MONTANA PCMH PROGRAM
2016 Reporting Form for Quality Metrics
(Reporting Period: Calendar Year 2015)

THIS IS A FILLABLE FORM, PLEASE COMPLETE ELECTRONICALLY

PCMH Organization name: _____
<p style="text-align:center">(PCMH Name)</p>

PCMH Official providing report: _____, _____
<table>
<tr><td>(Name)</td><td>(Title)</td></tr>
</table>

_____, _____
<table>
<tr><td>(Phone)</td><td>(E-mail)</td></tr>
</table>

Date report submitted: _ _ / _ _ / _ _ _ _
<p>(Mo/Da/Year)</p>

If CSI has questions pertaining to the data provided in this report, the data contact person for your organization is: _____, _____,
<table>
<tr><td>(Name)</td><td>(Title)</td></tr>
</table>

_____, _____
<table>
<tr><td>(Phone)</td><td>(E-mail)</td></tr>
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DATA FROM CALENDAR YEAR 2015

Two options exist for reporting in 2016. Which one of these options are you using?

_____ **Option 1:** A patient-level data report with the data elements required in the table in Attachment 3 for each measure, for each patient, provided in a separate electronic file. Also complete the form below. *(Patient-level reports may be submitted for a sample of patients, using the prescribed sampling strategy. See Attachment 4)*

OR

_____ **Option 2:** An attested aggregate data report, using the form below, with data confirmed by the staff in the organization. *(Sampling is NOT allowed for this option.)*

Please Note: In 2017, patient-level data will be required.

The form below is required for BOTH option 1 and 2.

Metric 1: Blood Pressure Control
MEASURE NUMBERS: CMS 165v3/NQF 0018/PQRS 236

- **Option 1, total patient-level report AND Option 2, attested aggregate report:**
1. _____(#) : total number of patients 18 through 85 years of age in the entire clinic population
2. _____(#) : denominator - number of patients 18 through 85 years of age who had a diagnosis of essential hypertension within the first six months of the measurement period or any time prior to the measurement period
3. _____(#) : numerator - number of patients in the denominator whose most recent blood pressure is adequately controlled (systolic blood pressure < 140 mmHg and diastolic blood pressure < 90 mmHg) during the measurement period

- **Option 1, sample patient-level report:**
1. _____(#) : total number of patients 18 through 85 years in the entire clinic population
2. _____(#) : denominator - number of patients in the random sample, 18 through 85 years of age, who had a diagnosis of essential hypertension within the first six months of the measurement period or any time prior to the measurement period
3. _____(#) : numerator - number of patients in the random sample denominator population whose most recent blood pressure is adequately controlled (systolic blood pressure < 140 mmHg and diastolic blood pressure < 90 mmHg) during the measurement period

Metric 2: Tobacco Use and Intervention
MEASURE NUMBERS: CMS 138v3/NQF 0028/PQRS 226

- **Option 1, total patient-level report AND Option 2, attested aggregate report:**
1. _____ (#): total number of patients aged 18 years and older in the entire clinic population
2. _____ (#): total number of patients aged 18 years and older in the entire clinic population who are current tobacco users
3. _____ (#): denominator - total number of patients aged 18 years and older seen for at least two visits or at least one preventive visit during the measurement period
4. _____ (#): numerator - total number of patients in the denominator population who were screened for tobacco use at least once within 24 months AND who received tobacco cessation counseling intervention if identified as a tobacco user

- **Option 1, sample patient-level report:**
1. _____(#) : total number of patients aged 18 years and older in the entire clinic population
2. _____ (#): total number of patients aged 18 years and older in the entire clinic population who are current tobacco users
3. _____(#) : denominator - total number of patients in the random sample aged 18 years and older seen for at least two visits or at least one preventive visit during the measurement period
4. _____(#) : numerator - total number of patients in the random sample denominator population who were screened for tobacco use at least once within 24 months AND who received tobacco cessation counseling intervention if identified as a tobacco

Metric 3: A1C control
MEASURE NUMBERS: CMS 122V3/NQF 0059/PQRS 001

- **Option 1, total patient-level report AND Option 2, attested aggregate report:**
1. _____(#) : total number of patients 18 through 75 years of age in the entire clinic population
2. _____(#) : denominator - number of patients 18 through 75 years of age with a diagnosis of diabetes mellitus in the entire clinic population
3. _____(#) : numerator - number of adults in the denominator population whose most recent HbA1c level (performed during the measurement period of calendar year 2015) is > 9.0%

- **Option 1, sample patient-level report:**
1. _____(#) : total number of patients 18 through 75 years of age in the entire clinic population
2. _____(#) : denominator - number of patients in the random sample 18 through 75 years of age with diagnosis of diabetes mellitus in the entire clinic population
3. _____(#) : numerator for this measure, number of patients in the random sample denominator population whose most recent HbA1c level (performed during the measurement period of calendar year 2015) is > 9.0%

Metric 4: Age-appropriate immunization for children
MEASURE NUMBERS: N/A (HRSA Quality of Care Measure)

- **Option 1, total patient-level report and Option 2, attested aggregate report**
   a. Number of children in the PCMH patient population aged 36 months by January 1, 2016 =_____
   b. Number of children meeting criteria 'a' who received ≥4 doses of DTaP = _____
   c. Number of children meeting criteria 'a' who received ≥3 doses of HepB = _____
   d. Number of children meeting criteria 'a' who received ≥3 doses of Hib =_____
   e. Number of children meeting criteria 'a' who received ≥3 doses of IPV =_____
   f. Number of children meeting criteria 'a' who received ≥1 dose of MMR =_____
   g. Number of children meeting criteria 'a' who received ≥4 doses of PCV =_____
   h. Number of children meeting criteria 'a' who received ≥1 dose of VAR =_____
   i. Number of children meeting criteria 'a' who received each of the following: ≥4 doses of DTaP, ≥3 doses of HepB, ≥3 doses of Hib, ≥3 doses of IPV, ≥1 dose of MMR, ≥4 doses of PCV, and ≥1 dose of VAR = _____

- **Option 1, sample patient-level report:**
   a. Number of children in the PCMH patient population aged 36 months by January 1, 2016 =_____
   b. Number of children meeting criteria in 'a' identified in the random sample =_____
   c. Number of children in 'b' who received ≥4 doses of DTaP = _____
   d. Number of children in 'b' who received ≥3 doses of HepB = _____
   e. Number of children in 'b' who received ≥3 doses of Hib =_____
   f. Number of children in 'b' who received ≥3 doses of IPV =_____
   g. Number of children in 'b' who received ≥1 dose of MMR =_____
   h. Number of children in 'b' who received ≥4 doses of PCV =_____
   i. Number of children in 'b' who received ≥1 dose of VAR =_____

j. Number of children in 'b' who received each of the following: ≥4 doses of DTaP, ≥3 doses of HepB, ≥3 doses of Hib, ≥3 doses of IPV, ≥1 dose of MMR, ≥4 doses of PCV, and ≥1 dose of VAR = _____

Metric 5: Screening for Clinical Depression and Follow-up Plan
MEASURE NUMBERS: CMS 2V4/NQF 0418/PQRS 134

- **Option 1, total patient-level report AND Option 2, attested aggregate report:**
1. _____(#): denominator - all patients aged 12 years or older in the entire clinic population
2. _____(#): total number of patients in the denominator population who were screened positive for clinical depression
3. _____ (#): numerator - patients screened for clinical depression on the date of the encounter using an age appropriate standardized tool AND, if positive, a follow-up plan is documented on the date of the positive screen

- **Option 1, sample patient-level report:**
1. _____(#): denominator - total number patients in the random sample population aged 12 years or older
2. _____(#): total number of patients aged 12 years or older in the random sample population who were screened positive for clinical depression
3. _____ (#): numerator - patients in random sample denominator who were screened for clinical depression on the date of the encounter using an age appropriate standardized tool AND, if positive, a follow-up plan is documented on the date of the positive screen